

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Haive</i>	<i>JC 19</i>	<i>03-19-01</i>
O.I.P.E. CLASSIFIER	<i>JS</i>	<i>32</i>	<i>4/12</i>
FORMALITY REVIEW	<i>ghe</i>	<i>946</i>	<i>05-23-01</i>
RESPONSE FORMALITY REVIEW	<i>A-M</i>	<i>JC 580</i>	<i>08-07-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/10/03
2	✓	✓	4/10/03
3	✓	✓	4/10/03
4	✓	✓	4/10/03
5	✓	✓	4/10/03
6	✓	✓	4/10/03
7	✓	✓	4/10/03
8	✓	✓	4/10/03
9	✓	✓	4/10/03
10	✓	✓	4/10/03
11	✓	✓	4/10/03
12	✓	✓	4/10/03
13	✓	✓	4/10/03
14	✓	✓	4/10/03
15	✓	✓	4/10/03
16	✓	✓	4/10/03
17	✓	✓	4/10/03
18	✓	✓	4/10/03
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25	✓	✓	4/10/03
26	✓	✓	4/10/03
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28	✓	✓	4/10/03
29	✓	✓	4/10/03
30	✓	✓	4/10/03
31	✓	✓	4/10/03
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44	✓	✓	4/10/03
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46	✓	✓	4/10/03
47	✓	✓	4/10/03
48	✓	✓	4/10/03
49	✓	✓	4/10/03
50	✓	✓	4/10/03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*TCS*  
*05/10/01*  
*14/01/03*